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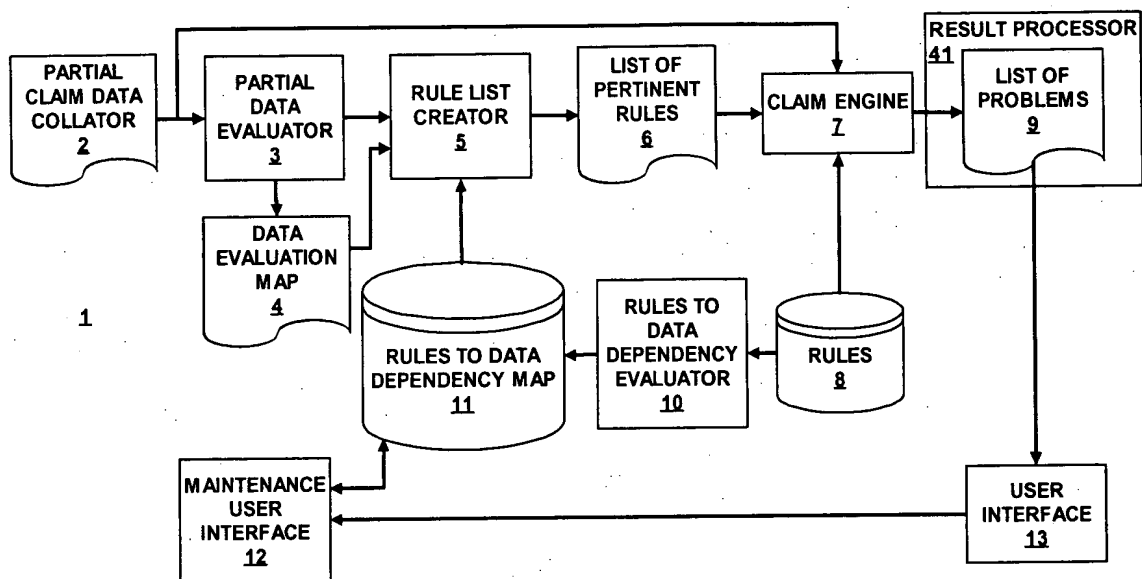


Fig. 1

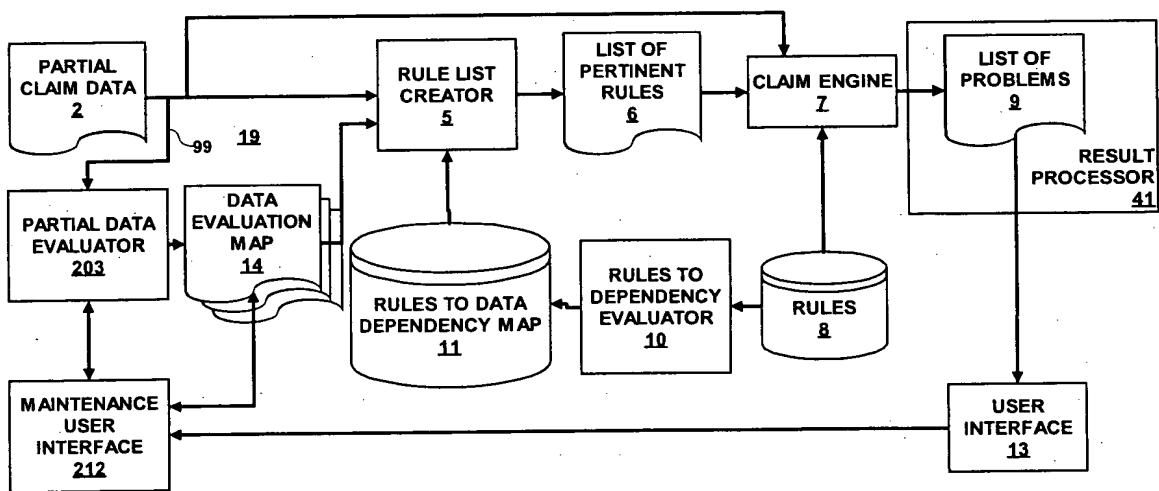
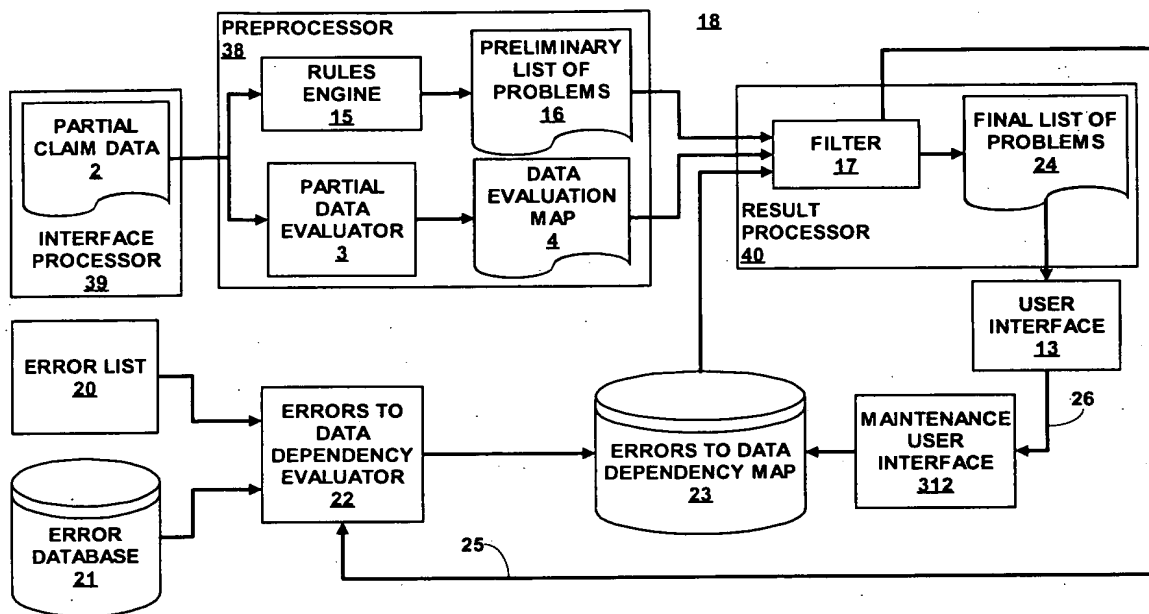


Fig. 2



**Fig. 3**

<b>PATIENT</b> <b>Michael Jordan</b> <small>DOB 01/01/1955 (37Y) Help</small>		<small>R Reports Ancillary</small> <small>Ref Reports Main Hosp</small> <small>Status:</small>	<small>Social Security #:</small> <small>Medical Record #:</small> <small>Enc Counter Data #:</small> <small>Encounter #:</small>
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**Patient Demographics**

Name	Address & Telephones	Personal Information	Care Providers	Clinical History	Advance Directives	Relationships
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**Name (1 on record)** [View/Add names](#) ?

<b>First Name:</b> <input type="text" value="Michael"/> <span style="float: right;">28</span>	<b>Nickname:</b> <input type="text"/>
<b>Middle Name:</b> <input type="text"/>	<b>Prefix:</b> <input type="text"/>
<b>Last Name:</b> <input type="text" value="Jordan"/> <span style="float: right;">29</span>	<b>Suffix:</b> <input type="text"/>
<input type="checkbox"/> Maiden name	<b>Degree:</b> <input type="text"/> <span style="float: right;">33</span>
<b>Name type:</b> <input type="text" value="Legal"/>	

**Addresses (1 on record)** [Address Changes](#)

<b>Type:</b> <input type="text" value="Mailing"/> <span style="float: right;"><input type="checkbox"/> Non-USA address</span>	<b>Patient doesn't have:</b> <input type="checkbox"/> an address
<b>Street:</b> <input type="text" value="111 Market St"/>	
<b>Zip code:</b> <input type="text"/>	<b>State:</b> <input type="text" value="30"/> <span style="float: right;"><input type="text" value="Pennsylvania"/></span>
<b>City:</b> <input type="text" value="Philadelphia"/>	
<b>County:</b> <input type="text"/>	
<b>Country:</b> <input type="text" value="USA"/>	

**Incomplete Data:**  
 Patients Insurer requires  
 Zip code to be entered.

<input type="button" value="Check-in"/>	<input type="button" value="Check-in Summary"/>	<input type="button" value="Patient Demographic"/>	<input type="button" value="Encounter Details"/>	<input type="button" value="Insurance"/>	<input type="button" value="Guardian Demographic"/>	<input type="button" value="Cancel"/>	<input type="button" value="Summary"/>	<input type="button" value="Next"/>	<input type="button" value="Do"/>
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Fig. 4